

# APPLICATION FOR CHANGE/TRANSFER OF WATER RIGHT

AUS 15 2005

DEPARTMENT OF ECOLOGY EASTERN REGIONAL OFFICE

For filing with Ecology or with County Conservancy Boards

#### A MINIMUM FEE OF \$10.00 PAYABLE TO ECOLOGY MUST ACCOMPANY THIS APPLICATION

Check all that apply.)  Change purpose(s) of use  Add purpose(s) of use  Change point(s) of diversion/withdrawal  Add point(s) of diversion/withdrawal  Change/transfer place of use  Other (i.e. consolidation, intertie, trust water)  Explain:	CHANGE No. <u>C53-</u> #28  DATE ACCEPTED <u>O1 10</u> FEE \$ <u>10.92</u> REC'  CHECK No. <u>15171</u>	CHECK No. 15171  SEPA:   Exempt   Not exempt			
**IF MORE SPACE IS NEEDED, ATTACH ADDITION.	AL SHEETS (PLEASE PRINT OF	TYPE CI FARI VI**			
	ME SHEETS HELMOL FRIMT ON	THE VERNIET)			
1. Applicant Information:		T			
APPLICANT/BUSINESS NAME	PHONE NO.	FAX NO.			
ADDRESS .	(609) 529-7006				
S4 DAVIEL LAW		en e			
Wasta Wasta	STATE WA.	ZIP CODE 92362			
CONTACT NAME (IF DIFFERENT FROM ABOVE)	PHONE NO.	FAX NO.			
		( )			
ADDRESS		6 4			
CITY	STATE	ZIP CODE			
2. Water Right Information:					
	CORDED NAME(S) GOLDON	WICHER			
DO YOU OWN THE RIGHT TO BE CHANGED? XYES INO					
IF NO, PROVIDE OWNER(S) NAME and ADDRESS:					
HAS THE WATER BEEN PUT TO BENEFICIAL USE IN THE LAST FIVE (5	YEARS? YES NO				
Please attach copies of any documentation that demonstrate was established. Also, if you have a water system plan capplication.					
FOR OFFICE U	SE ONLY				
APP. NO PERMIT NO CERT. NO	D CERT. OF CHAN	GE NO,			

## 3. Point(s) of Diversion/Withdrawal:

AR.		
A.	- VICTION	94
A-		
	Existing	9

SOURCE	NO.	1/4	1/4	SEC.	TWP.	RGE.	PARCEL#	WELL TAG #
WALLA WALLA RIVER	1	NE	SE	4	6	35	35-06-04-51-0026	
			1400					

**B.** Proposed

SOURCE	NO.	1/4	1/4	SEC.	TWP.	RGE.	PARCEL#	WELL TAG #
WHELA WALLA RIVER	2	NE	SE	4	6	35	35-06-04-51-0026	
vi cor viragi zivon		1.2		<u> </u>	-	23	7, 500	

DO YOU OWN THE EXISTING AND PROPOSED POINT(S) OF DIVERSION/WITHDRAWAL?

EXISTING: Y YES INO PROPOSED: Y YES INO - IF NO, PROVIDE OWNER(S) NAME:

Please include copies of all water well reports involved with this proposal. Also, if you know the distances from the nearest section corner to the above point(s) of diversion/withdrawal, please include that information in Item No. 6 (remarks) or as an attachment.

### 4. Purpose of Use:

#### A. Existing

PURPOSE OF USE	GPM or CFS	ACRE-FT/YR	PERIOD OF USE
NO CHANGE - SEE CERT 784			
The state of the s			

B. Proposed

GPM or CFS	ACRE-FT/YR	PERIOD OF USE
		v v
		· · · · · · · · · · · · · · · · · · ·

#### 5. Place of Use:

A Fristing

1/4 1/4 SEC. TWP. RGE. COUNTY PARCEL# #OI	F ACRES

D. P	roposeu						
		L	EGAL DES	CRIPTION OF L	ANDS WHERE NEW USE IS	PROPOSED:	
1/4	1/4	SEC.	TWP.	RGE.	COUNTY	PARCEL#	# OF ACRES
DO YO	U OWN ALL THE	LANDS IN	THE PROPO	SED PLACE OF	USE? YES INO	- IF NO, PROVIDE OWNER	(S) NAME:
					21		

Attach a detailed map of your proposed change/transfer. The map should show existing and proposed point(s) of diversion/withdrawal, place of use and any other features involved with this application. If platted property, please include a certified copy of the plat map.

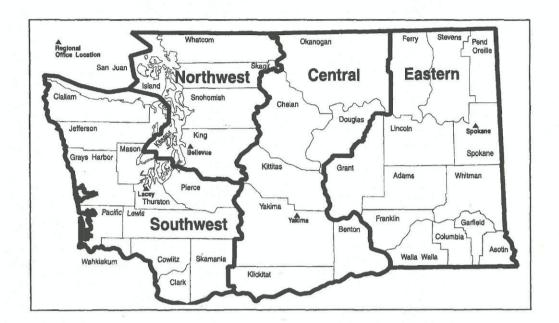
Are there any ADDITIONAL WATER rights OR CLAIMS RELATED to the same property as the ONE PROPOSED FOR CHANGE/TRANSFER?

YES D NO – IF YES, PROVIDE THE WATER RIGHT/CLAIM NUMBER(S): WW AW. CERT. NO. 786 6. Remarks and Other Relevant Information: IF FOR SEASONAL OR TEMPORARY, START DATE \_\_\_\_/\_\_\_ END DATE \_\_\_\_/ Certain applications may incur a Real Estate Excise Tax liability for the seller of the water rights. The Department of Revenue has requested notification of potential taxable water right related actions and therefore may be provided with a copy of this request. Please contact the State Department of Revenue for further information. The phone number is (360) 570-3265. The address is: Department of Revenue, Real Estate Excise Tax, PO Box 47477, Olympia, WA 98504-7477. 7. Signatures: I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I am hereby granting staff from the Department of Ecology or the County Conservancy Board access to the above site(s) for inspection and monitoring purposes. If assisted in the preparation of the above application, I understand that all responsibility for the accuracy of the information rests with me. Land Owner(s) of Existing Place of Use) IMPORTANT! APPLICATION FILING INFORMATION IS PROVIDED ON THE NEXT PAGE. WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S): APPLICATION FEE NOT ENCLOSED ☐ MAP NOT INCLUDED or INCOMPLETE □ ADDITIONAL SIGNATURES REQUIRED SECTION IS INCOMPLETE MOTHER/EXPLANATION:

DATE: 08/16/20

#### IMPORTANT!

Submit your application to Ecology at the regional office for the area of proposed or existing water use or at a Conservancy Board with jurisdiction. Below is a map of the State of Washington, with outlines of the four Ecology regional offices. If you have questions about your application or whether a County Conservancy Board with jurisdiction exists, contact the Water Resources program at the regional office in which your project is located.



Department of Ecology Central Regional Office 15 W. Yakima Avenue, Suite 200 Yakima, WA 98902 Telephone: (509) 575-2490

Department of Ecology Northwest Regional Office 3190 – 160<sup>th</sup> Avenue SE Bellevue, WA 98008-5452 Telephone: (425) 649-7000 Department of Ecology Eastern Regional Office N. 4601 Monroe, Suite 202 Spokane, WA 99205-1295 Telephone: (509) 329-3400

Department of Ecology Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 Telephone: (360) 407-6300

If you need assistance in the application process or need this application in an alternate format, please call the Water Resources Program at (360) 407-6600 or TTY (for the speech or hearing impaired) at 711 or 1-800-833-6388.